

U.S. ICE DETAINER

File No. TBD

Date: 11/21/2008

Name and title of institution

LEHIGH COUNTY PRISON
Allentown, PA

Or any subsequent Law Enforcement Agency

From: (ICE office address)

Immigration and Customs Enforcement
Detention and Removal Operations
1243 County Welfare Road
Leasport, PA 19535

Name of alien: **Ernesto GALARZA**

Date of birth: **9/20/1974**

Nationality: **Dominican Republic** Sex **Male**

You are advised that the action noted below has been taken by Immigration and Customs Enforcement, concerning the above-named inmate of your institution:

☒ Investigation has been initiated to determine whether this person is subject to removal/deportation from the United States.

☐ A Notice to Appear or other charging document initiating removal/deportation proceedings, was served on

(Date)

☐ A warrant of arrest in removal/deportation proceedings, a copy of which is attached, was served on

(Date)

Deportation or removal from the United States has been ordered.

It is requested that you:

Please accept this notice as a detainer. This is for notification purposes only and does not limit your discretion in any decision affecting the offender's classification work and quarters assignments, or other treatment which he or she would otherwise receive.

☒ Federal regulations (8 CFR 287.7) require that you detain the alien for a period not to exceed 48 hours (excluding Saturdays, Sundays and Federal holidays) to provide adequate time for ICE to assume custody of the alien. You may notify ICE by calling (610) 374-8743 during business hours or 802 872-6020 after hours in an emergency.

☒ Please complete and sign the bottom block of the duplicate of this form and return it to this office. ☐ A self-addressed stamped envelope is enclosed for your convenience. ☒ Please return a signed copy via facsimile to

610 374-9810

(Area code and facsimile number)

Return fax to the attention of

, at

(Name of ICE officer handling case)

(Area code and phone number)

☒ Notify this office of the time of release at least 30 days prior to release or as far in advance as possible.

☒ Notify this office in the event of the inmate's death or transfer to another institution.

☐ Please cancel the detainer previously placed by ICE on

Mark Szalczyk

(Signature of ICE official)

Deportation Officer

(Title of ICE official)

Receipt acknowledged:

Date of latest conviction:

Latest conviction charge:

Estimated release date:

Signature and title of official:

U.S. Department of Homeland Security
Immigration and Customs Enforcement

Immigration Detainer - Notice of Action

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11/24/2008Mark Szalezyk

(Signature of ICE official)

Deportation Officer

(Title of ICE official)

Receipt acknowledged:

Date of latest conviction:

Latest conviction charge:

Estimated release date:

Signature and title of official:

Cancel detainer 11/24/08 *[Signature]* (Rev. 4-1-97)N
ICE ICE